program, while 68% of mid-sized hospitals offered it and 91% of hospitals with RN FTE staff sizes greater than 200 (chi-square p-value = 0.005).

Surprisingly, only 48% of all hospitals surveyed reported that they use public recognition programs to acknowledge the work of their nursing staff. Public recognition of employees is a relatively low-cost approach that reaps big rewards in terms of increasing employee satisfaction and generating employee loyalty. The use of public recognition programs tended to vary by hospital size. Mid-sized hospitals were the ones most likely to use public recognition programs while about half of large hospitals did and only about a third of small hospitals reported using this strategy. Table 12 reports the percentages of hospitals of various size and whether or not they were using public recognition of their nursing personnel as a retention strategy.

Table 12. Percent of NC Hospitals that Use Public Recognition Programs for Retention

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By Hospital RN Staff Size				
(total RN FTEs budgeted)	100 or less	101 - 200	201 or more	
No	71.0	29.0	51.5	
Yes	29.0	71.0	48.5	
By Number of In-Patient Beds in Service	Less than 90	90 - 250	251 or more	
By Number of In-Patient Beds in Service No	Less than 90 66.7	90 - 250 35.1	251 or more 54.2	

Chi-Square p-values by RN FTEs: 0.004, by Beds in Service: 0.025

Table 13. Percent of NC Hospitals that Use Shared Governance Programs for Retention

By Hospital RN Staff Size			
(total RN FTEs budgeted)	100 or less	101 - 200	201 or more
No	77.4	77.4	51.5
Yes	22.6	22.6	48.5
By Number of In-Patient Beds in Service	Less than 90	90 - 250	251 or more
By Number of In-Patient Beds in Service No	Less than 90 77.8	90 - 250 75.7	251 or more 50.

Chi-Square p-values by RN FTEs: 0.035, by Beds in Service: 0.045